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97235654

QUIT CLAIM DEED Statutory (Illinois)

Village of East Hazel Crest
Real Estate Transfer Tax-\$25.00 *

[Signature]
Date

MAIL TO: Scott R. Reich
116 North Chicago Suite 555
Joliet, Illinois 60432

NAME AND ADDRESS OF TAXPAYER:
Mr. Alvin R. Fugett
P. O. Box 608
Beecher, Illinois 60401

[Stamp]
RECORDED
INDEXED
FEB 11 1997

THE GRANTOR: AMY MARLENE FUGETT

of the Village of E. Hazelcrest County of Cook State of Illinois
for and in consideration of TEN AND NO/100 DOLLARS
and other good and valuable considerations in hand paid.
CONVEY and QUIT CLAIM to ALVIN R. FUGETT

(GRANTEE'S ADDRESS) 17105 Laflin
of the Village of E. Hazelcrest County of Cook State of Illinois
all interest in the following described Real Estate situated in the County of
COOK in the State of Illinois, to wit:

97235654

THE WEST 67.7' OF LOT 5 (EXCEPT THAT PARCEL LYING SOUTH OF THE RIGHT OF WAY OF THE ILLINOIS TOLL ROAD; ALSO EXCEPT THE NORTH 53.76' OF THE EAST 26' OF SAID WEST 67.7' OF LOT 5) IN BLOCK 1 IN OLIVER L. WATSON'S COTTAGE HOME ADDITION TO HAZELCREST, A SUBDIVISION OF THE NORTHWEST 1/4 OF SECTION 29, TOWNSHIP 36 NORTH, RANGE 14, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

DEPT-10 PENALTY \$22.00

DEPT-11 RECORDING \$25.50

14558 1804 0317 04/04/97 15:41:00

4042 + JJ 3-97-235654

(NOTE: If additional space is required for legal, attach on separate 8 1/2"x11" sheet).

hereby releasing and waiving all rights under and by virtue of the Homestead Exemption Laws of the State of Illinois.

Permanent Index Number(s) 29-29-301-014

Property Address: 17105 Laflin, East Hazelcrest, Illinois

DATED this 6 day of February 1997.

Amy Marlene Fugett (Seal) _____ (Seal)

AMY MARLENE FUGETT (Seal) _____ (Seal)

NOTE: PLEASE TYPE OR PRINT NAME BELOW ALL SIGNATURES.

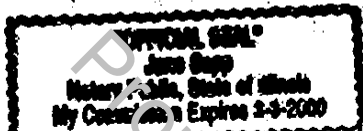
T. 25.50
S. 22.50
47.50
14.00

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STATE OF ILLINOIS
County of COOK

I, the undersigned, a Notary Public in and for the said County and State aforesaid, DO HEREBY CERTIFY THAT AMY MARLENE FUGETT personally known to me to be the same person whose name is subscribed to the foregoing instrument, appeared before me this day in person and acknowledged that she signed, sealed and delivered the said instrument as her free and voluntary act, for the uses and purposes therein set forth.

GIVEN under my hand and Notarial seal this 6th day of February,
A.D., 1997.



Jane Sapp
Notary Public

(Seal)

My commission expires on March 3, 2000.

MUNICIPAL TRANSFER STAMP (If Required)

COUNTY/ILLINOIS TRANSFER STAMP

NAME & ADDRESS OF PREPARER:

Scott R. Reich, Attorney at Law
TROY, REICH, ORLOFF & ASSOCIATES
116 North Chicago, Suite 555
Joliet, Illinois 60432

EXEMPT under provisions of paragraph E
Section 17, Real Estate Transfer Act.
Date: 2-6-97

W. B. Dick
Buyer, Seller or Representative

**This conveyance must contain the name and address of the grantee for tax billing purposes: (Chap. 55 ILCS 5/3-5020) and name and address of the person preparing the instrument (Chap. 55 ILCS 5/3-5022).

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STATEMENT BY GRANTOR AND GRANTEE

The grantor or his agent affirms that, to the best of his knowledge, the name of the grantee shown on the deed or assignment of beneficial interest in a land trust is either a natural person, an Illinois corporation or foreign corporation authorized to do business or acquire and hold title to real estate in Illinois, a partnership authorized to do business or acquire and hold title to real estate in Illinois, or other entity recognized as a person and authorized to do business or acquire title to real estate under the laws of the State of Illinois.

Dated: 2-27, 1997 Signature: [Signature]
Grantor or Agent

Subscribed and Sworn to before

me by the said
this 27 day of February, 1997.
Notary Public [Signature]

OFFICIAL SEAL
MICHELE R. KING
Notary Public, State of Illinois
My Commission Expires 12/31/99

The grantee or his agent affirms and verifies that the name of the grantee shown on the deed or assignment of beneficial interest in a land trust is either a natural person, an Illinois corporation or foreign corporation authorized to do business or acquire and hold title to real estate in Illinois, a partnership authorized to do business or acquire and hold title to real estate in Illinois, or other entity recognized as a person and authorized to do business or acquire and hold title to real estate under the laws of the State of Illinois.

Dated: 2-27, 1997 Signature: [Signature]
Grantee or Agent

Subscribed and sworn to before

me by the said
this 27 day of February, 1997.
Notary Public [Signature]

OFFICIAL SEAL
MICHELE R. KING
Notary Public, State of Illinois
My Commission Expires 12/31/99

NOTE: Any person who knowingly submits a false statement concerning the identity of a grantee shall be guilty of a Class C misdemeanor for the first offense and of a Class A misdemeanor for subsequent offenses.

(Attach to deed or ABI to be recorded in Cook County, Illinois, exempt under the provisions of Section 4 of the Illinois Real Estate Transfer Tax Act.)

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K.C.T.
49834

MAP SYSTEM

CHANGE OF INFORMATION FORM

INFORMATION TO BE CHANGED

Use this form for name / address changes on real property tax record of Cook County Illinois. It is also to acquire PROPERTY ADDRESSES for each PIN in our records.

Such changes must be kept within the space limitations shown. DO NOT use punctuation. Allow one space between names and initials, numbers and street names, and unit or apt numbers. PLEASE PRINT IN CAPITAL LETTERS WITH BLACK PEN ONLY! This is a SCANNABLE DOCUMENT - DO NOT XEROX THE BLANK FORM. All completed original forms must be returned to your supervisor or Jim Davoport each day.

If a TRUST number is involved, it must be put with the NAME. Leave a space between the name and the trust number. A single last name is adequate if you can't have enough room for the full name. Property Index Numbers MUST be included on every form.

PIN:

29 - 29 301 - 014 -

NAME:

FULGETT

MAILING ADDRESS:

STREET NUMBER STREET NAME APT or UNIT

P. O. BOX 608

CITY:

BEECHER

STATE:

IL

ZIP CODE:

60401 -

PROPERTY ADDRESS:

STREET NUMBER STREET NAME APT or UNIT

17105 LAFLIN

CITY:

E. HAZELCREST

STATE:

IL

ZIP CODE:

60429 -

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